

COURSE REGISTRATION

Applications will be accepted for:

- ✓ Day 1 AM Lectures only
- ✓ Day 2 AM Lectures only
- ✓ Entire two-day course (lecture and laboratory)

Applicants for the entire course, i.e., those attending the wet laboratory sessions, must submit proof of rabies vaccination with their application.

Fee for lectures only is \$40.00 per day.

Fee for entire two-day course is \$160.00.

Fees include course materials, breaks, and lunch.

Until January 20, 2004, applications for the entire two-day course will be accepted only from California public health laboratory personnel with appropriate immune status. After January 20, 2004, the laboratory seats will be opened to all applicants with appropriate immune status and will be filled in order of receipt of completed registration form and payment.

TO REGISTER: Complete all sections of the application form. Deadline for all applications is February 20, 2004. If paying by check, make check payable to APHL. If paying by credit card (Visa, MasterCard, American Express), complete the credit card information. Mail payment and completed application form to:

Registrar

National Laboratory Training Network
California Department of Health Services
850 Marina Bay Parkway, E164
Richmond, CA 94804

Or

You may fax the completed registration form to NLTN at 510-412-1412.

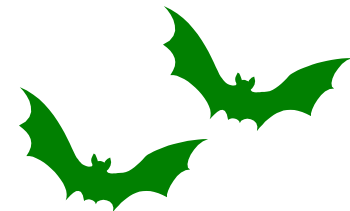
Registrations must be received in advance of the course. No on-site registrations will be accepted. Confirmation notices will be sent only for the laboratory session.

National Laboratory Training Network
California Department of Health Services
850 Marina Bay Parkway, E164
Richmond, CA 94804

LABORATORY METHODS FOR DETECTING RABIES VIRUS

MARCH 10-11, 2004

CALIFORNIA DEPARTMENT
OF HEALTH SERVICES
RICHMOND CA



Sponsored by

California Department of Health Services
Viral and Rickettsial Disease Laboratory
and
National Laboratory Training Network

COURSE DESCRIPTION

This intermediate-level course will provide a comprehensive update in the laboratory aspects of rabies testing. Emphasis will be placed on implementation of a standardized DFA test for detection of rabies virus in animal and human tissue. Applicants may choose to register for the morning lecture sessions only, or for the full two-day course which includes the afternoon laboratory sessions.

TARGET AUDIENCE

This course is targeted to personnel in public health laboratories interested in rabies testing. Priority will be given to those applicants who perform rabies testing. Persons applying for the laboratory portions of the course must submit proof of immunization for rabies.

COURSE OBJECTIVES

Following this course, all course participants will be able to:

- Discuss why a standardized DFA test for rabies is needed in the United States
- Describe how to perform the standardized DFA test for rabies
- Describe potential problems with rabies testing and how they can be avoided
- Define Quality Systems for rabies testing, including proficiency testing and personnel competency requirements
- Describe molecular methods used in rabies diagnosis
- Describe clinical aspects of rabies in humans and discuss the epidemiology and control of animal rabies in the United States

In addition, participants in the wet laboratory session will be able to perform, interpret, and troubleshoot the standardized DFA test for rabies.

COURSE AGENDA DAY ONE

8:00	Welcome and Introductory Remarks
8:15	Rabies DFA: Need/Rationale for Standardized Testing – Charles Rupprecht
8:50	Rabies Practice Assessment Overview of Problems and Solutions – Faculty
9:10	New DFA Testing Principles and Procedures – Lillian Orciari
9:30	Break
10:00	Basic Principles in Fluorescence Microscopy – Jim Powell
10:50	Preparation and Evaluation of Conjugate – Bob Rudd
11:20	Troubleshooting the DFA Test: Staining, Mounting, Reading and Interpretation – Bob Rudd
12:00	LUNCH
1:00	Laboratory Safety in the Rabies Laboratory Shipping Guidelines – Bob Rudd Necropsy of Animals for Rabies Diagnosis and Other Brain Pathologies- Video and Discussion - Staff DFA Wet Laboratory – Faculty and Staff
4:30	Adjourn

COURSE AGENDA DAY TWO

8:00	Quality Systems in Rabies Testing: Proficiency testing Personnel training for competency - Jim Powell
8:45	Confirmatory Testing, Repeat Staining – Lillian Orciari
9:15	Rabies Diagnostics by Molecular Methods – Lillian Orciari
10:00	Break
10:20	Serology and Serologic Testing – Michael Niezgoda
10:50	Clinical Aspects of Rabies in Humans Diagnosis of Rabies in Humans Pre and Post Exposure Prophylaxis Issues Epidemiology & Control of Rabies in the United States The Laboratory's Role in Wildlife Rabies Control – Charles Rupprecht
12:20	LUNCH
1:20	Laboratory Fluorescence Microscopy – Selection, Use and Preventive Maintenance - Jim Powell Continue DFA Wet Laboratory – Faculty and Staff
4:30	Adjourn

COURSE FACULTY and STAFF

Charles Rupprecht, PhD, Centers for Disease Control and Prevention, Atlanta, GA

Lillian Orciari, Centers for Disease Control and Prevention, Atlanta, GA

Michael Niezgoda, Centers for Disease Control and Prevention, Atlanta, GA

Jim Powell, Wisconsin State Hygienic Laboratory, Madison, WI

Bob Rudd, New York Health Department, Albany, NY

David Schnurr, PhD, Viral and Rickettsial Disease Laboratory, CDHS, Richmond, CA

Alex Hewitt, Viral and Rickettsial Disease Laboratory, CDHS, Richmond, CA

CONTINUING EDUCATION

- The National Laboratory Training Network is approved as a provider of continuing education program in the clinical laboratory sciences by the ASCLS P.A.C.E.® Program.
- The NLTN is approved by the California Department of Health Services as a CA CLS Accrediting Agency (#0022).
- Day One Lecture only is 3 contact hours.
Day Two Lecture only is 4 contact hours.
- Two-day Lecture and Lab is 13.5 contact hours.

SPECIAL NEEDS AND ADDITIONAL INFORMATION

In compliance with the Americans with Disabilities Act, individuals needing special accommodations should notify the NLTN Richmond Office at least 14 days prior to the workshop by calling 1-800-536-NLTN or 510-412-1400. You may send a fax to us at 510-412-1412 or you may send an E-mail to poffice@NLTN.org.

PLANNING TEAM AND FACILITATORS

David Schnurr, PhD, Viral and Rickettsial Disease Laboratory, CDHS, Richmond, CA
Alex Hewitt, Viral and Rickettsial Disease Laboratory, CDHS, Richmond, CA
Karen Mulawski, National Laboratory Training Network, Richmond, CA
Marguerite Oates, National Laboratory Training Network, Richmond, CA

DIRECTIONS TO SITE

**CA Department of Health Services
Richmond Laboratory Complex (RLC) Auditorium
850 Marina Bay Parkway, Richmond CA 94804**

This is a secure government facility and strict security policies are in effect. Plan to arrive early to allow time for security screening.

FROM SACRAMENTO/VALLEJO ON I-80 WEST

Take Cutting Way exit. Turn right onto Cutting, turn left on 23rd St./Marina Bay Parkway (same street). Go over the 580 freeway and take a left at the first stop light. Go through the large gates (visitor entrance) and stop at the RLC security station. You will need to show your photo ID at this time. (Your name will be on a list of those participating in the course.)

FROM SAN FRANCISCO/OAKLAND ON I-80 EAST

Take 580 freeway exit (toward Richmond). Take Marina Bay Parkway/23rd St. exit. (exit after Regatta) Take left on Marina Bay Parkway/23 St. Go over the 580 freeway and take a left at the first stop light. Go through the large gates (visitor entrance) and stop at the RLC security station. You will need to show your photo ID at this time. (Your name will be on a list of those participating in the course.)

Parking and Sign-in: Park in the east lot and go to the main entrance. (Security station guard will direct you.) Sign in. You will need to show your photo ID and go through a scanner. Proceed to the auditorium.

NEW !

LENDING LIBRARY INDEX IS NOW ON-LINE.



★ Log on to www.nltn.org and become a user of the National Laboratory Training Network's On-line Lending Library Index. The index lists over 900 training and educational materials available for loan, **free of charge**, to laboratory scientists. Ideal for in-service training, cross-training, student education and self-study, the lending library items are available in a variety of formats. Log on to the NLTN Lending Library Index, create your library user account and begin checking out items on-line today at www.nltn.org.



The National Laboratory Training Network is a training system sponsored by the Centers for Disease Control and Prevention (CDC) and the Association of Public Health Laboratories (APHL).

The program sponsors thank Olympus for providing microscopes for this course.



National Laboratory Training Network Registration Form

(Please type or print.) Check which event you plan to attend.

- ☐ Lab Methods for Detecting Rabies Virus—**LECTURE ONLY** PA3804, March 10, 2004, Richmond, CA
☐ Lab Methods for Detecting Rabies Virus—**LECTURE ONLY** PA3904, March 11, 2004, Richmond, CA
☐ Lab Methods for Detecting Rabies Virus—**LECTURE & LAB** PA4004, March 10-11, 2004, Richmond, CA

Applicant Information

(Dr./Mr./Miss./Ms./Mrs.)

Title: _____ First Name: _____ M.I.: _____ Last Name: _____

Position Title: _____ State Licensure Number (If applicable): _____

Employer's Name: _____

Mailing Address: (Please specify, Employer's or your Home address?)

City: _____ State/Country: _____ Zip/Postal Code: _____

Work Phone Number: _____ Work Fax Number: _____ E-mail Address: _____

(May we E-mail future training event notifications? Please circle, YES or NO.)

Signature of Applicant: _____ Date: _____

(Please review all options in the three categories before circling the one most appropriate in each category.)

Occupation

Physician 01
Veterinarian 02
Laboratorian 04
Nursing Professional 05
Sanitarian 06
Administrator 08
Safety Professional 11
Educator 13
Epidemiologist 14
Environmental Scientist 15
Other 12

Type of Employer

Health Department (State or Territorial) 01
Health Department (Local, City or County) 03
Government (Other Local, not City or County) 04
Centers for Disease Control and Prevention 05
U.S. Food and Drug Administration 09
U.S. Department of Defense 11
Veterans Administration Medical Center/Hospital 12
Other (Federal Employer) 15
Foreign 16
College or University 19
Private Industry 21
Private Clinical Laboratory 23
Physician's Office Laboratory/Group Practice 24
Hospital (Private Community) 17
Hospital (Other) 33
State Funded Hospital 25
City or County Funded Hospital 26
Health Maintenance Organization 28
Non-profit 31
Unemployed or Retired 32
Other 30

Education Level (Highest Completed)

Degree
Associate 04
Bachelor 05
Masters 06
Doctoral (M.D.) 07
Doctoral (Other than M.D.) 08
Technical/Hospital School 09
Some College 03
High School Graduate 02
Some High School 01

The information requested on this form is collected under the authority of 42 U.S.C., Section 243 (CDC). The requested information is used only to process your training registration and will be disclosed only upon your written request. Continuing education credit can only be provided when all requested information is submitted. Furnishing the information requested on this form is voluntary. Public reporting burden for this collection of information is estimated to average five minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not to respond to a collection of information, unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road, N.E., MS D-24, Atlanta, Georgia 30333; ATTN: PRA (0920-0017).CDC 32.1 (Rev. 6/17/2003)

Register Early!

The Laboratory seats are limited to 30.

Registration Fees:

Lecture only—\$40.00 **per day**

Lecture and Lab—\$160.00

- ☐ Enclosed is my proof of rabies immunization.

Registration Deadline: See brochure.

- ☐ Enclosed is my check or money order payable to APHL.

- ☐ Please invoice.

P.O. # _____

- ☐ Bill my credit card. (Circle one.)

VISA Master Card

American Express

Cardholder's Name: _____

Card Number: _____

Expiration Date: _____

Card Holder's Signature: _____

Date: _____

Amount of Payment: _____

Submit your completed registration form to:

Registrar

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Richmond, CA 94804

Or Fax to: 510-412-1412